

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
Public Health


Sexually Transmitted Disease Program

Early Syphilis Surveillance Summary

Cases reported as of December 31, 2003

Issued January 15, 2004

*STD Screening Guidelines
for Sexually Active
HIV Positive Persons
See page 16!*



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January 15, 2004

Dear Colleague:

We are pleased to release the January 2004 *Early Syphilis Surveillance Summary* for Los Angeles County. Between January 1 and December 31, 2003, 720 early syphilis cases were reported. During the same period in 2002, a total of 729 cases of early syphilis were reported. With primary and secondary syphilis, 398 cases have been reported year to date (YTD), compared to 371 cases YTD in 2002.

Of 720 early syphilis cases YTD, 470 cases (65%) are among men who have sex with men (MSM) and men who have sex with men and women (MSM/W). Two hundred seventy (57%) of these cases are HIV positive. For MSM and MSM/W, cases continue to be concentrated in Metro SPA 4 and the Hollywood-Wilshire health district.

If you would like to view or download the January 2004 *Early Syphilis Surveillance Summary* in full, please visit the STD Program website at www.lapublichealth.org/std. You may also request to receive future reports by e-mail by calling the STD Program at (213) 744-3070.

Sincerely,

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The *Early Syphilis Surveillance Summary* is published on a monthly basis by the Sexually Transmitted Disease Program of the Los Angeles County Department of Health Services. This report is also available in PDF format, on-line at www.lapublichealth.org/std.

If you would like to receive surveillance reports and other information from the STD Program, please call (213) 744-3070 and provide the attendant with your e-mail address or register for **STDInfo** on-line at <http://ladhs.org/listserv>.

SUGGESTED CITATION

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FRONT COVER: *Treponema pallidum* (syphilis spirochete)

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Table 1. Early Syphilis - All Cases	2003				2002				2001				2000			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	398	322	720	(100.0)	371	358	729	(100.0)	197	225	422	(100.0)	144	215	359	(100.0)
Gender																
Male	376	274	650	(90.2)	353	313	666	(91.3)	183	167	350	(82.9)	117	130	247	(68.8)
Female	22	46	68	(9.4)	18	45	63	(8.6)	12	57	69	(16.3)	23	81	104	(28.9)
Transgender:M to F	.	2	2	(0.2)	.	.	.	(0.0)	2	1	3	(0.7)	4	4	8	(2.2)
Sexual Orientation¹																
MSM	261	172	433	(60.1)	273	218	491	(67.3)	125	86	211	(50.0)	60	46	106	(29.5)
MSM/W	25	12	37	(5.1)	26	14	40	(5.4)	10	5	15	(3.5)	7	5	12	(3.3)
MSW	30	38	68	(9.4)	30	41	71	(9.7)	30	43	73	(17.2)	35	61	96	(26.7)
WSM	18	35	53	(7.3)	17	39	56	(7.6)	8	47	55	(13.0)	20	68	88	(24.5)
WSW	1	1	2	(0.2)	.	.	.	(0.0)	.	2	2	(0.4)	.	1	1	(0.2)
WSW/M	.	.	.	(0.0)	.	.	.	(0.0)	.	1	1	(0.2)	1	.	1	(0.2)
TG/STG	.	2	2	(0.2)	.	.	.	(0.0)	2	1	3	(0.7)	4	4	8	(2.2)
Refused	1	.	1	(0.1)	2	1	3	(0.4)	3	6	9	(2.1)	5	3	8	(2.2)
Unknown	62	62	124	(17.2)	23	45	68	(9.3)	19	34	53	(12.5)	12	27	39	(10.8)
HIV Positive																
Yes	157	130	287	(39.8)	188	155	343	(47.0)	71	66	137	(32.4)	.	.	.	(0.0)
No	147	111	258	(35.8)	130	110	240	(32.9)	63	70	133	(31.5)	.	1	1	(0.2)
Unknown	94	81	175	(24.3)	53	93	146	(20.0)	63	89	152	(36.0)	144	214	358	(99.7)
Race/Ethnicity																
White	197	98	295	(40.9)	172	114	286	(39.2)	69	44	113	(26.7)	43	23	66	(18.3)
Afr.-Amer.	49	55	104	(14.4)	57	54	111	(15.2)	40	31	71	(16.8)	36	35	71	(19.7)
Latina/o	116	146	262	(36.3)	119	167	286	(39.2)	77	136	213	(50.4)	60	143	203	(56.5)
Asian/Pac. Is.	15	11	26	(3.6)	13	13	26	(3.5)	7	5	12	(2.8)	2	10	12	(3.3)
Am.Ind/Alas.Nat.	1	1	2	(0.2)	1	2	3	(0.4)	1	1	2	(0.4)	.	.	.	(0.0)
Other/Mixed	5	2	7	(0.9)	.	1	1	(0.1)	1	.	1	(0.2)	.	1	1	(0.2)
Unknown	15	9	24	(3.3)	9	7	16	(2.1)	2	8	10	(2.3)	3	3	6	(1.6)
Age Group																
<15	.	.	.	(0.0)	1	.	1	(0.1)	.	3	3	(0.7)	.	1	1	(0.2)
15-19	6	10	16	(2.2)	6	14	20	(2.7)	7	9	16	(3.7)	2	12	14	(3.8)
20-24	33	29	62	(8.6)	32	43	75	(10.2)	19	18	37	(8.7)	11	32	43	(11.9)
25-29	45	41	86	(11.9)	41	44	85	(11.6)	28	33	61	(14.4)	18	41	59	(16.4)
30-34	65	56	121	(16.8)	72	65	137	(18.7)	43	52	95	(22.5)	33	40	73	(20.3)
35-39	105	78	183	(25.4)	89	71	160	(21.9)	47	55	102	(24.1)	32	37	69	(19.2)
40-44	73	45	118	(16.3)	62	64	126	(17.2)	27	27	54	(12.7)	21	24	45	(12.5)
45-49	36	31	67	(9.3)	39	30	69	(9.4)	17	13	30	(7.1)	13	16	29	(8.0)
50-54	24	20	44	(6.1)	19	17	36	(4.9)	6	6	12	(2.8)	9	8	17	(4.7)
55-59	8	10	18	(2.5)	5	7	12	(1.6)	1	6	7	(1.6)	2	3	5	(1.3)
60 +	3	2	5	(0.6)	5	3	8	(1.0)	2	3	5	(1.1)	3	1	4	(1.1)

¹ Note: MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.

Table 2. Early Syphilis - SPA and Health District of Residence		2003				2001				2000			
		P&S	Early Latent		Total ES	P&S	Early Latent		Total ES	P&S	Early Latent		Total ES
		N	N	N	%	N	N	N	%	N	N	N	%
SPA	District												
SPA 1 - ANTELOPE VALLEY	Other/Unknown	2	2	4	(0.5)	1	.	1	(0.2)	3	2	5	(1.3)
	SPA Total	2	2	4	(0.5)	1	.	1	(0.2)	3	2	5	(1.3)
SPA 2 - SAN FERNANDO	District												
	East Valley	23	12	35	(4.8)	10	7	17	(4.0)	4	6	10	(2.7)
	Glendale	5	7	12	(1.6)	3	5	8	(1.8)	.	2	2	(0.5)
	San Fernando	10	10	20	(2.7)	2	4	6	(1.4)	.	1	1	(0.2)
	West Valley	29	19	48	(6.6)	8	7	15	(3.5)	6	8	14	(3.8)
	SPA Total	67	48	115	(15.9)	23	23	46	(10.9)	10	17	27	(7.5)
	District												
SPA 3 - SAN GABRIEL	Alhambra	2	4	6	(0.8)	1	2	3	(0.7)
	El Monte	1	7	8	(1.1)	4	10	14	(3.3)	2	11	13	(3.6)
	Foothill	4	5	9	(1.2)	2	1	3	(0.7)	2	2	4	(1.1)
	Pomona	9	8	17	(2.3)	5	10	15	(3.5)	6	9	15	(4.1)
	SPA Total	16	24	40	(5.5)	12	23	35	(8.2)	10	22	32	(8.9)
	District												
SPA 4 - METRO	Central	42	31	73	(10.1)	23	30	53	(12.5)	18	22	40	(11.1)
	Northeast	9	12	21	(2.9)	12	14	26	(6.1)	5	17	22	(6.1)
	Hollywood-Wilshire	153	105	258	(35.8)	51	44	95	(22.5)	37	32	69	(19.2)
	SPA Total	204	148	352	(48.8)	86	88	174	(41.2)	60	71	131	(36.4)
	District												
SPA 5 - WEST	West	29	15	44	(6.1)	11	5	16	(3.7)	5	2	7	(1.9)
	SPA Total	29	15	44	(6.1)	11	5	16	(3.7)	5	2	7	(1.9)
	District												
SPA 6 - SOUTH	Compton	7	7	14	(1.9)	5	10	15	(3.5)	3	15	18	(5.0)
	South	6	7	13	(1.8)	1	3	4	(0.9)	7	9	16	(4.4)
	Southeast	4	7	11	(1.5)	7	4	11	(2.6)	2	10	12	(3.3)
	Southwest	12	18	30	(4.1)	11	14	25	(5.9)	7	15	22	(6.1)
	SPA Total	29	39	68	(9.4)	24	31	55	(13.0)	19	49	68	(18.9)
	District												
SPA 7 - EAST	East Los Angeles	6	5	11	(1.5)	4	6	10	(2.3)	2	7	9	(2.5)
	Whittier	1	1	2	(0.2)	5	2	7	(1.6)	2	4	6	(1.6)
	Bellflower	9	1	10	(1.3)	3	8	11	(2.6)	2	3	5	(1.3)
	San Antonio	8	7	15	(2.0)	3	12	15	(3.5)	5	12	17	(4.7)
	SPA Total	24	14	38	(5.2)	15	28	43	(10.1)	11	26	37	(10.3)
	District												
SPA 8 - SOUTH BAY	Harbor	3	2	5	(0.6)	1	1	2	(0.4)	3	3	6	(1.6)
	Inglewood	4	17	21	(2.9)	7	7	14	(3.3)	11	3	14	(3.8)
	Torrance	6	5	11	(1.5)	4	3	7	(1.6)	3	1	4	(1.1)
	SPA Total	13	24	37	(5.1)	12	11	23	(5.4)	17	7	24	(6.6)
	District												
UNKNOWN SPA	Long Beach	2	2	4	(0.5)	4	2	6	(1.4)	3	4	7	(1.9)
	Other/Unknown	12	6	18	(2.5)	9	14	23	(5.4)	6	15	21	(5.8)
	SPA Total	14	8	22	(3.0)	13	16	29	(6.8)	9	19	28	(7.7)
	District												

Table 3. MSM ¹ General Demographics	2003				2002				2001				2000			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	286	186	472	(100.0)	299	232	531	(100.0)	137	92	229	(100.0)	71	55	126	(100.0)
Sexual Orientation																
MSM	261	172	433	(91.7)	273	218	491	(92.4)	125	86	211	(92.1)	60	46	106	(84.1)
MSM/W	25	12	37	(7.8)	26	14	40	(7.5)	10	5	15	(6.5)	7	5	12	(9.5)
TG/STG	.	2	2	(0.4)	.	.	.	(0.0)	2	1	3	(1.3)	4	4	8	(6.3)
HIV Positive																
Yes	150	120	270	(57.2)	174	138	312	(58.7)	70	54	124	(54.1)	.	.	.	(0.0)
No	105	48	153	(32.4)	94	56	150	(28.2)	39	17	56	(24.4)	.	.	.	(0.0)
Unknown	31	18	49	(10.3)	31	38	69	(12.9)	28	21	49	(21.3)	71	55	126	(100.0)
Race/Ethnicity																
White	167	81	248	(52.5)	152	96	248	(46.7)	59	27	86	(37.5)	30	14	44	(34.9)
Afr.-Amer.	25	20	45	(9.5)	35	24	59	(11.1)	20	9	29	(12.6)	9	8	17	(13.4)
Latina/o	75	78	153	(32.4)	95	98	193	(36.3)	52	47	99	(43.2)	30	31	61	(48.4)
Asian/Pac. Is.	10	5	15	(3.1)	10	8	18	(3.3)	5	4	9	(3.9)	1	1	2	(1.5)
Am.Ind/Alas.Nat.	.	1	1	(0.2)	1	1	2	(0.3)	.	1	1	(0.4)	.	.	.	(0.0)
Other/Mixed	4	.	4	(0.8)	.	.	.	(0.0)	1	.	1	(0.4)	.	.	.	(0.0)
Unknown	5	1	6	(1.2)	6	5	11	(2.0)	.	4	4	(1.7)	1	1	2	(1.5)
Age Group																
<15	.	.	.	(0.0)	1	.	1	(0.1)	.	.	.	(0.0)	.	.	.	(0.0)
15-19	2	2	4	(0.8)	3	7	10	(1.8)	4	1	5	(2.1)	.	.	.	(0.0)
20-24	22	13	35	(7.4)	25	20	45	(8.4)	13	5	18	(7.8)	4	5	9	(7.1)
25-29	30	20	50	(10.5)	35	24	59	(11.1)	21	14	35	(15.2)	7	11	18	(14.2)
30-34	48	32	80	(16.9)	60	50	110	(20.7)	26	22	48	(20.9)	19	13	32	(25.3)
35-39	83	50	133	(28.1)	74	52	126	(23.7)	38	24	62	(27.0)	21	15	36	(28.5)
40-44	49	28	77	(16.3)	55	47	102	(19.2)	20	16	36	(15.7)	12	6	18	(14.2)
45-49	27	22	49	(10.3)	27	15	42	(7.9)	9	4	13	(5.6)	6	3	9	(7.1)
50-54	17	15	32	(6.7)	12	12	24	(4.5)	5	2	7	(3.0)	2	2	4	(3.1)
55-59	6	4	10	(2.1)	4	4	8	(1.5)	1	3	4	(1.7)	.	.	.	(0.0)
60 +	2	.	2	(0.4)	3	1	4	(0.7)	.	1	1	(0.4)	.	.	.	(0.0)

¹ MSM includes gay and bisexual men, M to F transgenders, and men who have sex with M to F transgenders

Table 4. General Demographics - Female	2003				2002				2001				2000			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	22	46	68	(100.0)	18	45	63	(100.0)	12	57	69	(100.0)	23	81	104	(100.0)
Sexual Orientation																
WSM	18	35	53	(77.9)	17	39	56	(88.8)	8	47	55	(79.7)	20	68	88	(84.6)
WSW	1	1	2	(2.9)	.	.	.	(0.0)	.	2	2	(2.8)	.	1	1	(0.9)
WSW/M	.	.	.	(0.0)	.	.	.	(0.0)	.	1	1	(1.4)	1	.	1	(0.9)
Unknown	3	10	13	(19.1)	1	6	7	(11.1)	4	7	11	(15.9)	2	12	14	(13.4)
HIV Positive																
Yes	1	.	1	(1.4)	.	2	2	(3.1)	.	2	2	(2.8)	.	.	.	(0.0)
No	16	31	47	(69.1)	15	24	39	(61.9)	4	26	30	(43.4)	.	.	.	(0.0)
Unknown	5	15	20	(29.4)	3	19	22	(34.9)	8	29	37	(53.6)	23	81	104	(100.0)
Race/Ethnicity																
White	2	5	7	(10.2)	1	3	4	(6.3)	3	4	7	(10.1)	1	6	7	(6.7)
Afr.-Amer.	5	18	23	(33.8)	11	11	22	(34.9)	4	10	14	(20.2)	11	15	26	(25.0)
Latina/o	15	19	34	(50.0)	6	27	33	(52.3)	4	42	46	(66.6)	10	55	65	(62.5)
Asian/Pac. Is.	.	2	2	(2.9)	.	2	2	(3.1)	.	.	.	(0.0)	.	4	4	(3.8)
Am.Ind/Alas.Nat.	.	.	.	(0.0)	.	1	1	(1.5)	.	.	.	(0.0)	.	.	.	(0.0)
Unknown	.	2	2	(2.9)	.	1	1	(1.5)	1	1	2	(2.8)	1	1	2	(1.9)
Age Group																
<15	.	.	.	(0.0)	.	.	.	(0.0)	.	3	3	(4.3)	.	1	1	(0.9)
15-19	2	4	6	(8.8)	1	3	4	(6.3)	1	7	8	(11.5)	1	9	10	(9.6)
20-24	4	10	14	(20.5)	1	15	16	(25.3)	1	9	10	(14.4)	5	19	24	(23.0)
25-29	5	6	11	(16.1)	1	6	7	(11.1)	3	6	9	(13.0)	4	21	25	(24.0)
30-34	5	9	14	(20.5)	4	4	8	(12.6)	1	12	13	(18.8)	5	9	14	(13.4)
35-39	3	6	9	(13.2)	5	5	10	(15.8)	.	11	11	(15.9)	1	9	10	(9.6)
40-44	1	5	6	(8.8)	1	5	6	(9.5)	2	3	5	(7.2)	2	6	8	(7.6)
45-49	2	5	7	(10.2)	3	4	7	(11.1)	3	4	7	(10.1)	2	5	7	(6.7)
50-54	.	1	1	(1.4)	2	1	3	(4.7)	.	1	1	(1.4)	2	1	3	(2.8)
55-59	.	.	.	(0.0)	.	1	1	(1.5)	.	.	.	(0.0)	1	1	2	(1.9)
60 +	.	.	.	(0.0)	.	1	1	(1.5)	1	1	2	(2.8)	.	.	.	(0.0)
Prenatal/Pregnant																
Yes	2	7	9	(13.2)	1	5	6	(9.5)	1	4	5	(7.2)	.	1	1	(0.9)
No	14	24	38	(55.8)	15	18	33	(52.3)	.	11	11	(15.9)	.	.	.	(0.0)
Unknown	6	15	21	(30.8)	2	22	24	(38.0)	11	42	53	(76.8)	23	80	103	(99.0)

Table 5. General Demographics - Heterosexual Men ¹	2003				2002				2001				2000			
	P&S		Early Latent		Total ES		P&S		Early Latent		Total ES		P&S		Early Latent	
	N		N		N		N		N		N		N		N	
Morbidity																
Total	30	38	68	(100.0)	30	41	71	(100.0)	30	43	73	(100.0)	35	61	96	(100.0)
Sexual Orientation																
MSW	30	38	68	(100.0)	30	41	71	(100.0)	30	43	73	(100.0)	35	61	96	(100.0)
HIV Positive																
Yes	3	2	5	(7.3)	6	1	7	(9.8)	.	3	3	(4.1)	.	.	.	(0.0)
No	22	28	50	(73.5)	18	27	45	(63.3)	19	27	46	(63.0)	.	1	1	(1.0)
Unknown	5	8	13	(19.1)	6	13	19	(26.7)	11	13	24	(32.8)	35	60	95	(98.9)
Race/Ethnicity																
White	6	.	6	(8.8)	7	3	10	(14.0)	4	4	8	(10.9)	6	3	9	(9.3)
Afr.-Amer.	9	9	18	(26.4)	10	13	23	(32.3)	7	6	13	(17.8)	10	8	18	(18.7)
Latina/o	12	25	37	(54.4)	10	23	33	(46.4)	17	32	49	(67.1)	18	44	62	(64.5)
Asian/Pac. Is.	2	3	5	(7.3)	2	2	4	(5.6)	1	1	2	(2.7)	1	5	6	(6.2)
Am.Ind/Alas.Nat.	.	.	.	(0.0)	.	.	.	(0.0)	1	.	1	(1.3)	.	.	.	(0.0)
Unknown	1	1	2	(2.9)	1	.	1	(1.4)	.	.	.	(0.0)	.	1	1	(1.0)
Age Group																
15-19	2	4	6	(8.8)	2	4	6	(8.4)	2	1	3	(4.1)	1	3	4	(4.1)
20-24	6	4	10	(14.7)	4	6	10	(14.0)	4	3	7	(9.5)	2	6	8	(8.3)
25-29	2	7	9	(13.2)	4	8	12	(16.9)	2	9	11	(15.0)	5	8	13	(13.5)
30-34	2	5	7	(10.2)	3	4	7	(9.8)	8	9	17	(23.2)	4	13	17	(17.7)
35-39	4	10	14	(20.5)	6	7	13	(18.3)	6	8	14	(19.1)	7	8	15	(15.6)
40-44	7	1	8	(11.7)	2	4	6	(8.4)	2	5	7	(9.5)	5	10	15	(15.6)
45-49	2	1	3	(4.4)	3	4	7	(9.8)	5	4	9	(12.3)	4	6	10	(10.4)
50-54	4	2	6	(8.8)	4	2	6	(8.4)	1	2	3	(4.1)	4	5	9	(9.3)
55-59	1	2	3	(4.4)	1	2	3	(4.2)	.	1	1	(1.3)	1	2	3	(3.1)
60 +	.	2	2	(2.9)	1	.	1	(1.4)	.	1	1	(1.3)	2	.	2	(2.0)

¹ Heterosexual men are male cases who did not report having male or M to F transgender sex partners.

Table 6. Behavioral Risk Factors by Sexual Orientation ¹	2003						2001					
	MSM & MSM/W		MSW		All Female		MSM & MSM/W		MSW		All Female	
	N	%	N	%	N	%	N	%	N	%	N	%
Anal Insertive												
Yes	288	(66.2)	8	(12.6)	.	(0.0)	150	(67.2)	4	(5.6)	.	(0.0)
No	67	(15.4)	40	(63.4)	34	(65.3)	20	(8.9)	21	(29.5)	20	(38.4)
Unknown	80	(18.3)	15	(23.8)	18	(34.6)	53	(23.7)	46	(64.7)	32	(61.5)
Anal Receptive												
Yes	285	(65.5)	.	(0.0)	4	(7.6)	144	(64.5)	1	(1.4)	3	(5.7)
No	71	(16.3)	48	(76.1)	32	(61.5)	26	(11.6)	23	(32.3)	15	(28.8)
Unknown	79	(18.1)	15	(23.8)	16	(30.7)	53	(23.7)	47	(66.1)	34	(65.3)
Oral Sex												
Yes	355	(81.6)	36	(57.1)	28	(53.8)	171	(76.6)	33	(46.4)	23	(44.2)
No	14	(3.2)	12	(19.0)	11	(21.1)	6	(2.6)	9	(12.6)	5	(9.6)
Unknown	66	(15.1)	15	(23.8)	13	(25.0)	46	(20.6)	29	(40.8)	24	(46.1)
Vaginal Sex												
Yes	22	(5.0)	55	(87.3)	43	(82.6)	8	(3.5)	62	(87.3)	43	(82.6)
No	376	(86.4)	.	(0.0)	2	(3.8)	92	(41.2)	1	(1.4)	1	(1.9)
Unknown	37	(8.5)	8	(12.6)	7	(13.4)	123	(55.1)	8	(11.2)	8	(15.3)
Anonymous Partners												
Yes	290	(66.6)	23	(36.5)	4	(7.6)	123	(55.1)	23	(32.3)	6	(11.5)
No	74	(17.0)	27	(42.8)	31	(59.6)	43	(19.2)	21	(29.5)	24	(46.1)
Unknown	71	(16.3)	13	(20.6)	17	(32.6)	57	(25.5)	27	(38.0)	22	(42.3)
Condom Used²												
Yes	109	(25.0)	10	(15.8)	9	(17.3)	64	(28.6)	19	(26.7)	11	(21.1)
No	210	(48.2)	38	(60.3)	26	(50.0)	78	(34.9)	28	(39.4)	19	(36.5)
Unknown	116	(26.6)	15	(23.8)	17	(32.6)	81	(36.3)	24	(33.8)	22	(42.3)
Incarcerated Past Year												
Yes	15	(3.4)	6	(9.5)	6	(11.5)	10	(4.4)	3	(4.2)	3	(5.7)
No	340	(78.1)	37	(58.7)	32	(61.5)	131	(58.7)	37	(52.1)	25	(48.0)
Unknown	80	(18.3)	20	(31.7)	14	(26.9)	82	(36.7)	31	(43.6)	24	(46.1)
IV Drug User												
Yes	10	(2.2)	1	(1.5)	1	(1.9)	3	(1.3)	3	(4.2)	1	(1.9)
No	353	(81.1)	50	(79.3)	38	(73.0)	177	(79.3)	51	(71.8)	34	(65.3)
Unknown	72	(16.5)	12	(19.0)	13	(25.0)	43	(19.2)	17	(23.9)	17	(32.6)
Non-IV Drug User												
Yes	111	(25.5)	13	(20.6)	10	(19.2)	53	(23.7)	20	(28.1)	5	(9.6)
No	248	(57.0)	38	(60.3)	30	(57.6)	124	(55.6)	28	(39.4)	29	(55.7)
Unknown	76	(17.4)	12	(19.0)	12	(23.0)	46	(20.6)	23	(32.3)	18	(34.6)

¹ Behavioral risk information is available starting in 2001 and includes closed cases only. Does not include cases with no information on sex partners.² Condom was used at last intercourse.

Table 7. Venue Risk by Sexual Orientation ¹	2003						2001					
	MSM & MSM/W		MSW		All Female		MSM & MSM/W		MSW		All Female	
	N	%	N	%	N	%	N	%	N	%	N	%
Bars and Clubs												
Yes	155	(35.6)	8	(12.6)	1	(1.9)	105	(47.0)	18	(25.3)	4	(7.6)
No	184	(42.2)	40	(63.4)	34	(65.3)	37	(16.5)	15	(21.1)	16	(30.7)
Unknown	96	(22.0)	15	(23.8)	17	(32.6)	81	(36.3)	38	(53.5)	32	(61.5)
Bathhouses/ Sex Clubs												
Yes	77	(17.7)	.	(0.0)	.	(0.0)	31	(13.9)	1	(1.4)	.	(0.0)
No	253	(58.1)	46	(73.0)	34	(65.3)	79	(35.4)	20	(28.1)	16	(30.7)
Unknown	105	(24.1)	17	(26.9)	18	(34.6)	113	(50.6)	50	(70.4)	36	(69.2)
Motels												
Yes	3	(0.6)	4	(6.3)	4	(7.6)	4	(1.7)	4	(5.6)	3	(5.7)
No	322	(74.0)	42	(66.6)	30	(57.6)	88	(39.4)	19	(26.7)	14	(26.9)
Unknown	110	(25.2)	17	(26.9)	18	(34.6)	131	(58.7)	48	(67.6)	35	(67.3)
Streets												
Yes	23	(5.2)	10	(15.8)	4	(7.6)	10	(4.4)	2	(2.8)	4	(7.6)
No	306	(70.3)	36	(57.1)	30	(57.6)	85	(38.1)	21	(29.5)	13	(25.0)
Unknown	106	(24.3)	17	(26.9)	18	(34.6)	128	(57.3)	48	(67.6)	35	(67.3)
Internet												
Yes	90	(20.6)	.	(0.0)	.	(0.0)	17	(7.6)	1	(1.4)	.	(0.0)
No	239	(54.9)	46	(73.0)	34	(65.3)	80	(35.8)	21	(29.5)	16	(30.7)
Unknown	106	(24.3)	17	(26.9)	18	(34.6)	126	(56.5)	49	(69.0)	36	(69.2)
Parks												
Yes	17	(3.9)	1	(1.5)	.	(0.0)	14	(6.2)	.	(0.0)	.	(0.0)
No	311	(71.4)	45	(71.4)	34	(65.3)	84	(37.6)	21	(29.5)	16	(30.7)
Unknown	107	(24.5)	17	(26.9)	18	(34.6)	125	(56.0)	50	(70.4)	36	(69.2)
Other Venue												
Yes	58	(13.3)	12	(19.0)	3	(5.7)	38	(17.0)	7	(9.8)	1	(1.9)
No	230	(52.8)	29	(46.0)	25	(48.0)	74	(33.1)	20	(28.1)	15	(28.8)
Unknown	147	(33.7)	22	(34.9)	24	(46.1)	111	(49.7)	44	(61.9)	36	(69.2)
Total	435	(100.0)	63	(100.0)	52	(100.0)	223	(100.0)	71	(100.0)	52	(100.0)

¹ Had sex or met sex partners at defined venues during the period when syphilis infection likely occurred (critical period).² Venue risk information is available starting in 2001 and includes closed cases only. Does not include cases with no information on sex partners.

Figure 1: Early Syphilis by Sexual Orientation* and Month of Diagnosis, January 1, 2001 Through August 31, 2003 (N= 1489)

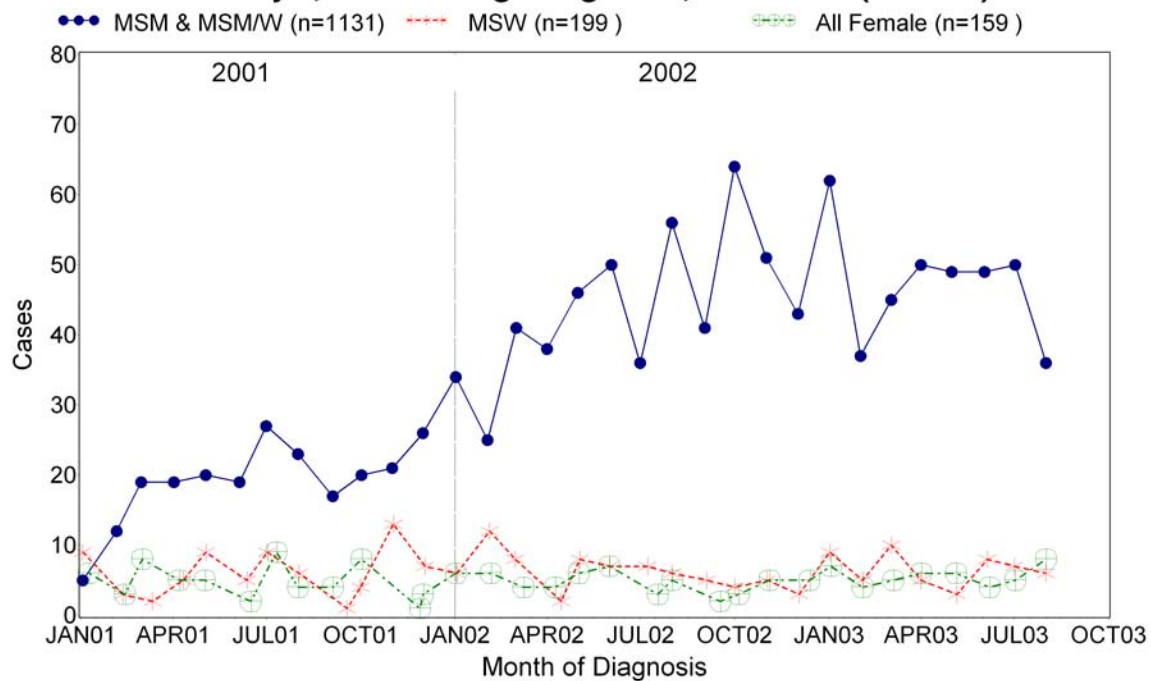
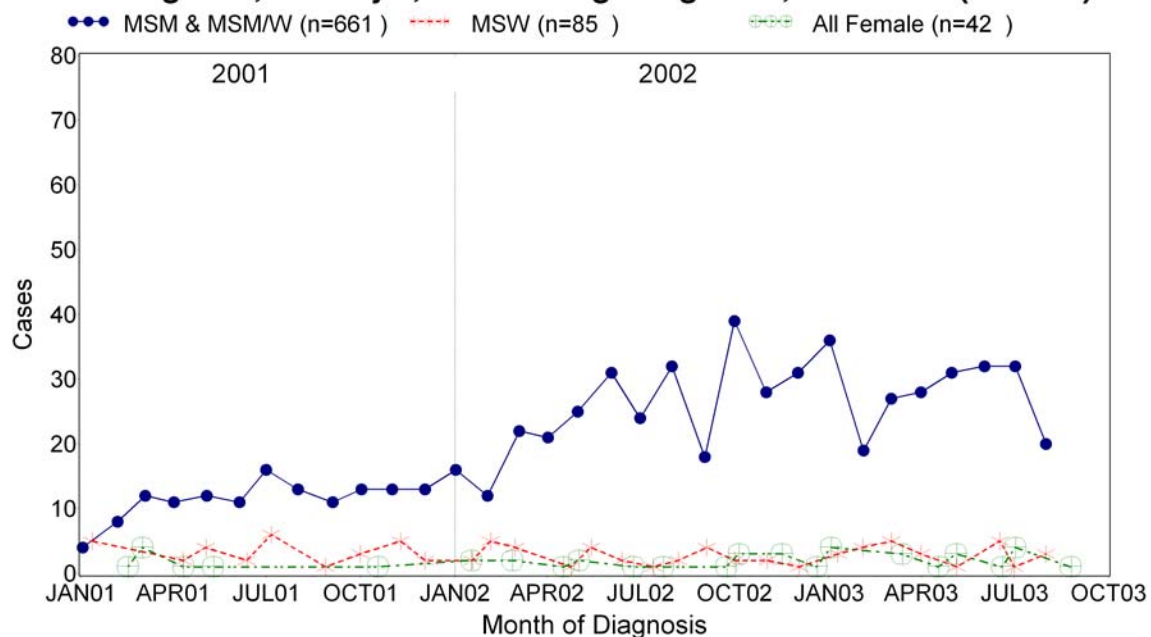
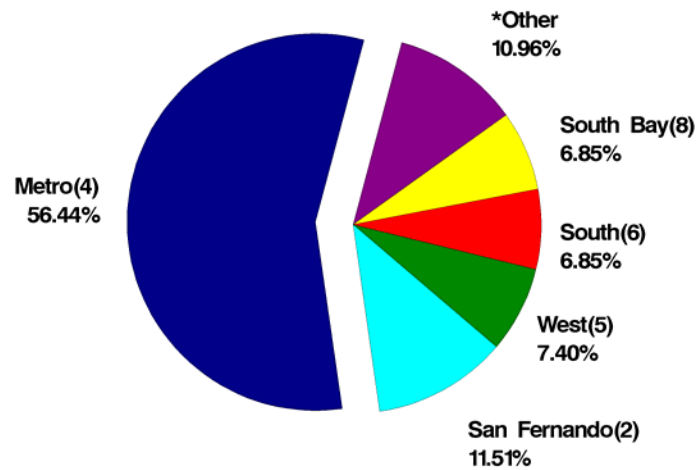


Figure 2: Primary and Secondary Syphilis by Sexual Orientation* and Month of Diagnosis, January 1, 2001 Through August 31, 2003 (N= 788)

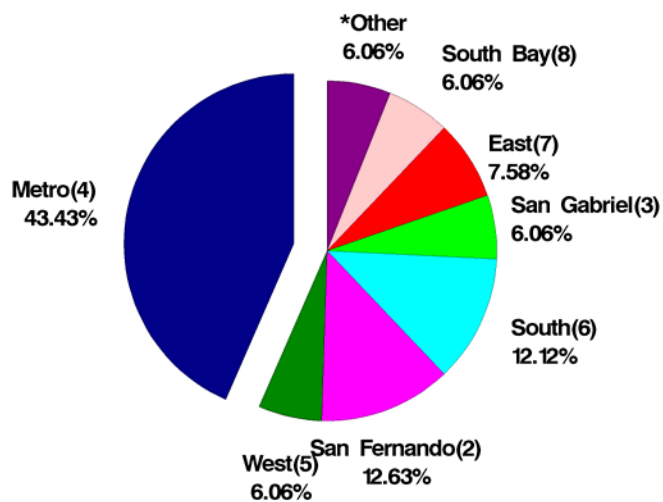


* Does not include cases lacking partner information.

Figure 3: Primary and Secondary Syphilis by SPA* 2001–2002 (N= 563)
2002 (N= 365)

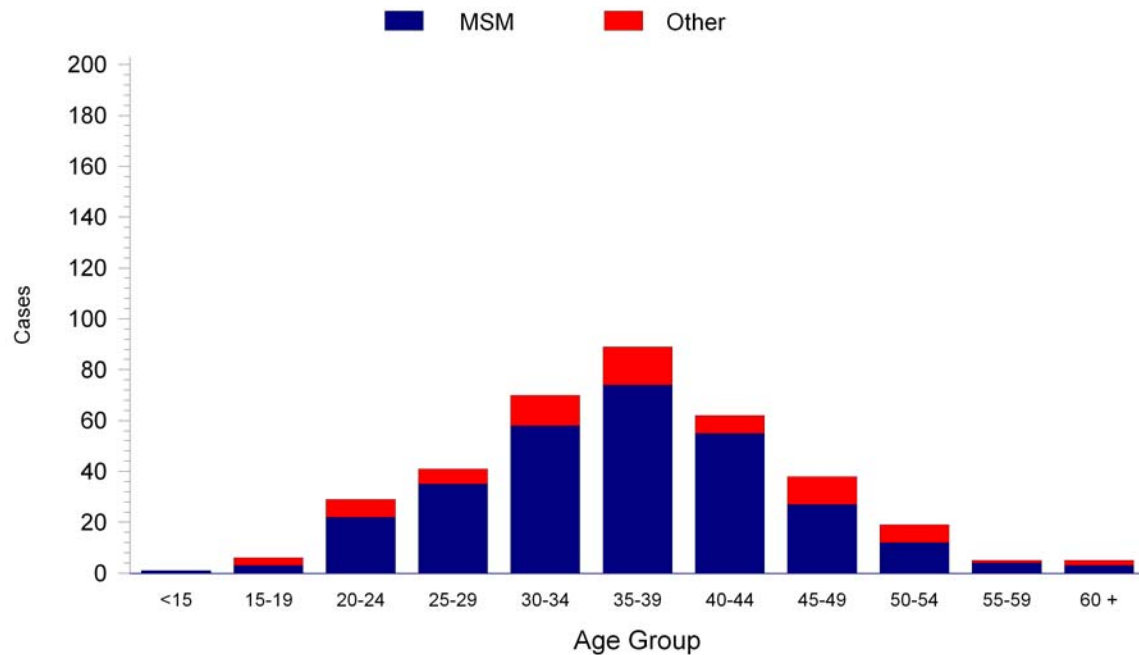


2001 (N= 198)

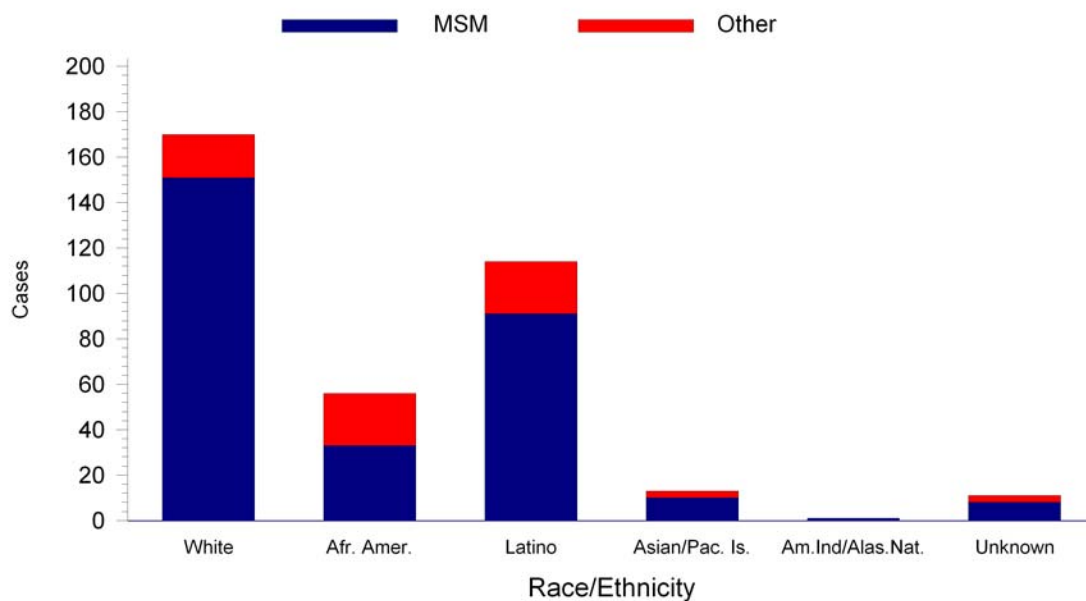


* SPAs having less than 6% of total cases are included in the 'Other' category.
 Table 2 contains numbers and percentages for all SPAs and Health Districts.

**Figure 4: Primary & Secondary Syphilis by Age Group & Sexual Orientation,*
Los Angeles County 2002 (N= 365)**

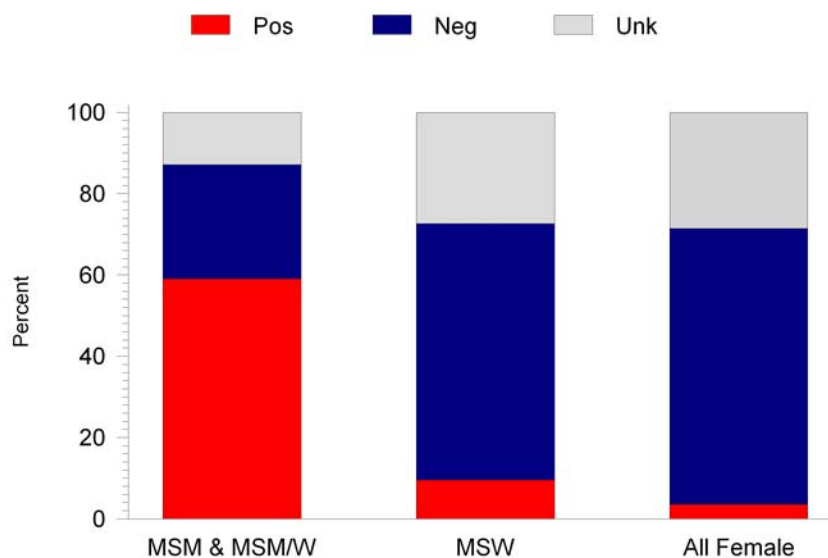


**Figure 5: Primary & Secondary Syphilis by Race/Ethnicity & Sexual Orientation,*
Los Angeles County 2002 (N= 365)**



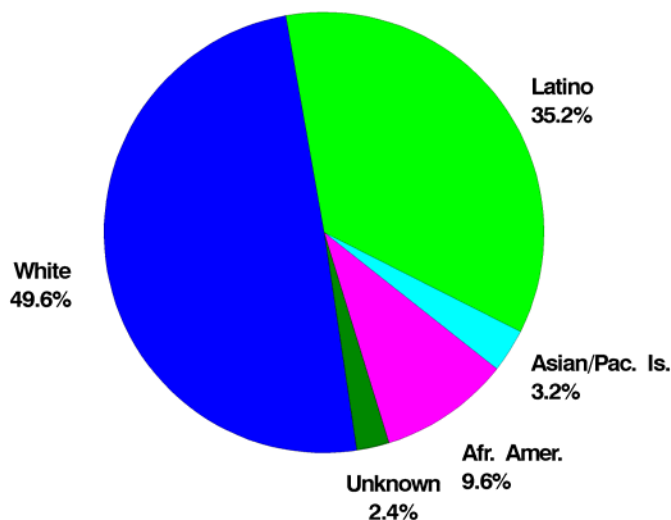
* MSM includes MSM, MSM/W, and TG/STG. Other includes all other sexual orientation, including unknown.

**Figure 6. Early Syphilis by HIV Status & Sexual Orientation,*
Los Angeles County 2002 (N= 649)**



* Does not include cases lacking partner information.

**Figure 7. Race/Ethnicity of Early Syphilis Cases Who Frequented Bathhouses
or Sex Clubs During the Critical Period,* Los Angeles County 2002 (N= 125)**



* The critical period during which the case was likely infected with syphilis

APPENDIX A: SURVEILLANCE NOTES

REPORT DELAY

Report delay is defined as the time interval between the date a syphilis diagnosis was made and the date the case was reported to the Health Department. Currently, the mean reporting delay for early syphilis is 20 days and the 95th percentile is 72 days. The impact of report delay must be considered when interpreting the data.

DATABASE UPDATE

Total may not be consistent with previous reports of previous years due to report delay and periodic update of the data base, including late reporting, changes in diagnosis and some deletion of duplicates.

EXCEPTIONS

The following exceptions exist in the database used to generate the tables and graphs in the January 2004 *Early Syphilis Surveillance Summary*.

- Of 964 Early Syphilis cases, 396 cases are still opened for investigation or are closure review queued.
- Of the 396 opened or closure review queued cases, 90 are cases without diagnosis pending investigation.

APPENDIX B: EARLY SYPHILIS CASE DEFINITION FOR INFECTIOUS CONDITIONS UNDER PUBLIC HEALTH SURVEILLANCE

State and local public health officials rely on health-care providers, laboratories, and other public health personnel to report the occurrence of reportable diseases to state and local health departments. Without such data, trends cannot be accurately monitored, unusual occurrences of diseases might not be detected, and the effectiveness of intervention activities cannot be easily evaluated.

The usefulness of public health surveillance data depends on its uniformity, simplicity, and timeliness. This case definition was established for uniform criteria for disease reporting and should not be used as the sole criteria for establishing clinical diagnoses, determining the standard of care necessary for a particular patient, setting guidelines for quality assurance, or providing standards for reimbursement. Use of additional clinical, epidemiological, and laboratory data may enable a physician to diagnose a disease even though the formal surveillance case definition may not be met.

This case definition was developed in collaboration with epidemiologists at the Centers for Disease Control and Prevention (CDC) and the Council of State and Territorial Epidemiologists (CSTE). It was approved by a full vote of the CSTE membership and also endorsed for use by the Association of Public Health Laboratories (APHL).

EARLY SYPHILIS CASE DEFINITION

Early syphilis includes primary, secondary and early latent cases reported within less than one year from the date of infection.

Syphilis is a complex sexually transmitted disease that has a highly variable clinical course. Classification by a clinician with expertise in syphilis may take precedence over the following case definitions developed for surveillance purposes.

PRIMARY SYPHILIS

Clinical description: A stage of infection with *Treponema pallidum* characterized by one or more chancres (ulcers); chancres might differ considerably in clinical appearance.

Laboratory criteria for diagnosis: Demonstration of *T. pallidum* in clinical specimens by darkfield microscopy, direct fluorescent antibody (DFA-TP), or equivalent methods.

Case classification - Probable: A clinically compatible case with one or more ulcers (chancres) consistent with primary syphilis and a reactive serologic test (nontreponemal: Venereal Disease Research Laboratory [VDRL] or rapid plasma reagin [RPR]; treponemal: fluorescent treponemal antibody absorbed [FTA-ABS] or microhemagglutination assay for antibody to *T. pallidum* [MHA-TP]).

Case classification - Confirmed: A clinically compatible case that is laboratory confirmed.

SECONDARY SYPHILIS

Clinical description: A stage of infection caused by *T. pallidum* and characterized by localized or diffuse mucocutaneous lesions, often with generalized lymphadenopathy. The primary chancre may still be present.

Laboratory criteria for diagnosis: Demonstration of *T. pallidum* in clinical specimens by dark field microscopy, DFA-TP, or equivalent methods.

Case classification - Probable: A clinically compatible case with a nontreponemal (VDRL or RPR) titer.

Case classification - Confirmed: A clinically compatible case that is laboratory confirmed.

EARLY LATENT SYPHILIS

Clinical description: A stage of infection caused by *T. pallidum* in which organisms persist in the body of the infected person without causing symptoms or signs. Latent syphilis is subdivided into early, late and unknown categories based on the duration of infection. When initial infection has occurred within the previous 12 months, latent syphilis is classified as early latent.

Case classification - Probable: Latent syphilis in a person who has evidence of having acquired the infection within the previous 12 months based on one or more of the following criteria:

- Documented seroconversion or fourfold or greater increase in titer of a nontreponemal test during the previous 12 months
- A history of symptoms consistent with primary or secondary syphilis during the previous 12 months
- A history of sexual exposure to a partner who had confirmed or probable primary or secondary syphilis or probable early latent syphilis (documented independently as duration <1 year)
- Reactive nontreponemal and treponemal tests from a person whose only possible exposure occurred within the preceding 12 months

APPENDIX C: WHERE TO REPORT COMMUNICABLE DISEASES IN LOS ANGELES COUNTY

LABORATORY SLIP	CLINICIAN'S CMR	SEND REPORTS TO:
Syphilis Chlamydia Gonorrhea	Syphilis Chlamydia Gonorrhea Chancroid Non-gonococcal Urethritis Pelvic Inflammatory Disease	Sexually Transmitted Disease Program 2615 S. Grand Avenue, Rm. 450 Los Angeles, CA 90007 Telephone: 213-744-3070 Fax: 213-749-9602
AIDS HIV (<i>As of July 1, 2002</i>)	AIDS HIV (<i>As of July 1, 2002</i>)	HIV Epidemiology Program 600 S. Commonwealth Ave., Suite 805 Los Angeles, CA 90005 Telephone: 213-351-8516 Fax: 213-467-4683 http://lapublichealth.org/hiv/hivreporting.htm
Tuberculosis	Tuberculosis	Tuberculosis Control 2615 S. Grand Avenue, Rm. 507 Los Angeles, CA 90007 Telephone: 213-744-6271 Fax: 213-749-0926
Cryptosporidiosis Diphtheria Encephalitis arboviral <i>E. coli</i> O157:H7 Hepatitis A, acute Hepatitis B, acute Listeriosis Malaria Measles (Rubeola) Plague Rabies Typhoid <i>Vibrio</i> Species	List of reportable diseases: http://lapublichealth.org/acd/cdrs.htm	Acute Communicable Diseases Morbidity Unit 313 N. Figueroa St., Rm. 117 Los Angeles, CA 90012 Telephone: 213-240-7821 Call toll free: 888-397-3993 Fax toll free: 888-397-3778
REQUIRED INFORMATION ON THE CMR: <ul style="list-style-type: none"> ✓ Patient Information: Name, gender, ethnic group, date of birth, occupation, address, telephone number, social security number. ✓ Diagnosis: Diagnosis, date of diagnosis, date of onset. ✓ Reporting Person: Name, address, telephone number. 		

APPENDIX D: LOS ANGELES COUNTY STD SCREENING GUIDELINES FOR SEXUALLY ACTIVE HIV POSITIVE PERSONS

Due to the continuing rise in syphilis as well as gonorrhea and chlamydia, we recommend routine screening of HIV infected persons based on the following schedule in order to decrease the transmission of these curable STDs as well as HIV.

INITIAL VISIT AND ANNUAL VISIT

1. Testing should be performed for gonorrhea and chlamydia using urine testing for men and/or endocervical swab testing for women. Gonorrhea culture may also be used. Syphilis screening should be performed with an RPR.
 - a. Patients engaging in rectal intercourse should be cultured for GC and CT from the anal site. DFA may also be used for chlamydia.
 - b. Patients engaging in oral sex defined as activity in which they are orally exposed should be cultured for GC and CT from the pharyngeal area. DFA may also be used for chlamydia.
2. Women should be evaluated for the above, plus trichomoniasis using culture or vaginal wet mount.

FOLLOW-UP VISITS (EVERY 3 – 6 MONTHS)

HIV infected persons with symptoms of an STD should be screened upon presentation for care. Screening for syphilis, GC, and CT should be performed at 3 to 6 month intervals for persons at high risk for STDs but without STD symptoms. These persons include but are not limited to:

1. Persons with multiple or anonymous sex partners.
2. Past history of any STD.
3. Persons who have been recently incarcerated or those who have had sexual relations with someone recently incarcerated.
4. Persons reporting other behaviors associated with the transmission of HIV and other STDs. These include:
 - a. Participation in sexual activities in bathhouses, sex clubs or circuit parties,
 - b. Use of the internet to recruit sex partners,
 - c. Engaging in sexual activity for money or drugs,
 - d. Use of sexual enhancement drugs such as methamphetamines (i.e., meth, glass, crystal), ecstasy, ketamine, viagra, cocaine, crack, GHB, and nitrates/poppers.
5. Persons with sex or needle sharing partner(s) with any of the above risks.
6. Persons using injection drugs.
7. Persons living on the street/homeless.
8. Person living in areas with high STD prevalence. Sexually active gay men in the Los Angeles area are considered high-risk.



COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
Public Health

SEXUALLY TRANSMITTED DISEASE PROGRAM

2615 South Grand Avenue, Room 500
Los Angeles, CA 90007